

City of Annapolis Other Postemployment Benefits

Actuarial Valuation As of June 30, 2013

**Produced by Cheiron** 

December 2013

# **Table of Contents**

Letter of Transmittal	i
Section I - Introduction	1
Section II - Valuation Results and Future Projections	2
Section III - Reconciliation with Prior Results	5
Section IV - Sensitivity of Trends	7
Section V - Actuarial Funding	8
Section VI - Accounting Disclosures	12
Appendix A – Participant Data, Assumptions and Methods	14
Appendix B – Substantive Plan Provisions	26
Appendix C – Glossary of Terms	29





December 16, 2013

#### VIA ELECTRONIC MAIL AND U.S. MAIL

Mr. Bruce Miller, Finance Director City of Annapolis 160 Duke of Gloucester Street Annapolis, Maryland 21401

City of Annapolis Other Postemployment Benefits Valuation Re:

Dear Bruce:

This report documents the results of the Other Postemployment Benefits (OPEB) valuation as of June 30, 2013, covering postretirement health insurance benefits. The following report contains our findings as well as commentary about Governmental Accounting Standards Board (GASB) standards.

The purpose of this report is to present the annual actuarial valuation of the City of Annapolis postretirement health insurance benefits. This report is for the use of the City of Annapolis and its auditors in preparing financial reports in accordance with applicable law and accounting requirements.

Appendix A describes the Participant Data, Assumptions, and Methods used in calculating the figures throughout the report. In preparing our report, we relied on information (some oral and some written) supplied by the city of Annapolis. This information includes, but is not limited to, the plan provisions, employee data, and financial information. The demographic assumptions used in this report are the same as those used by the State Retirement and Pension Systems of Maryland – Employees' Pension System for the general employees covered by this plan. We performed an informal examination of the obvious characteristics of the data for reasonableness and consistency in accordance with Actuarial Standard of Practice No. 23.

Appendix B contains our understanding of the substantive plan provisions based on the information provided by your office as of the valuation date. This report does not reflect any changes adopted after June 30, 2013.

This report reflects the benefits formalized in each agreement and depends on the future experience conforming to the actuarial assumptions used. The results will change to the extent that future experience differs from the assumptions. Actuarial computations are calculated based on our understanding of GASB 43/45 and are for purposes of fulfilling employer financial accounting requirements. Determinations for purposes other than meeting employer financial accounting requirements may be significantly different from the results in these exhibits. This report does not reflect future changes in benefits, penalties, taxes, excise taxes or administrative costs that may be required as a result of the Patient Protection and Affordable Care Act of 2010, related legislation, or regulations.



Fax: 703.893.2006

Mr. Bruce Miller City of Annapolis December 16, 2013

To the best of our knowledge, this report and its contents have been prepared in accordance with generally recognized and accepted actuarial principles and practices which are consistent with the Code of Professional Conduct and applicable Actuarial Standards of Practice set out by the Actuarial Standards Board. Furthermore, as credentialed actuaries we meet the Qualification Standards of the American Academy of Actuaries to render the opinion contained in this report. This report does not address any contractual or legal issues. We are not attorneys and our firm does not provide any legal services or advice.

This actuarial valuation report was prepared for the City of Annapolis for the purposes described herein, except that the plan auditor may rely on this report solely for the purpose of completing an audit related to the matters herein. This report is not intended to benefit any third party, and Cheiron assumes no duty or liability to any such party.

Sincerely, Cheiron

Margaret A. Tempkin, FSA, EA, MAAA

**Principal Consulting Actuary** 

John L. Colberg, FSA, EA, MAAA Principal Consulting Actuary



#### SECTION I INTRODUCTION

City of Annapolis has engaged Cheiron to provide a valuation of the Other Postemployment Benefit Plan. The primary purpose of performing this actuarial valuation is to:

- Estimate the current cost of the retiree health benefits using GASB 43/45 methodology under current funding strategy;
- Show sensitivities to changes in trends and assumptions; and
- Illustrate the long-term effect of GASB on the City's financial system under an actuarial funding strategy.

We have determined cost, liabilities, and other factors under the Plan on the basis that all actuarial assumptions and methods are reasonable.

### GASB's OPEB Requirements:

The Governmental Accounting Standards Board (GASB) has released Statement 43 regarding financial reporting for postemployment benefits plans other than pension plans and a companion Statement (number 45) regarding the employer accounting for these plans. Statement 43 is generally applicable where an entity has a separate trust or fund for OPEB benefits. Statement 45, which takes effect in the fiscal year ending June 30, 2009, requires the Plan Sponsor to book the actuarial cost (net of employee and retiree contributions) of the plan as an expense on its financial statements and then accrue a liability to the extent actual contributions were less than this expense. Additional disclosures include a description of the plan, summary of significant accounting policies, contributions, and a Schedule of Funding Progress, along with the methods and assumptions used for those disclosures.

## **Funding Policy**

The City of Annapolis currently pays for its postemployment health benefits on a pay-as-you-go (PAYGo) basis. We further understand that a dedicated Trust has not been established as of this valuation.



#### SECTION II VALUATION RESULTS AND FUTURE PROJECTIONS

Below we summarize our analysis:

- The actuarial liability under the Entry Age Normal Actuarial Cost Method as of June 30, 2013 is \$50.5 million on a pay-as-you-go funding approach, compared to \$0 in assets.
- The Annual Required Contribution (ARC) under GASB 43 and 45 for FY 2014 is \$4.9 million, which is \$3.4 million in excess of an estimated pay-as-you-go cost of \$1.5 million based on the assumptions used in this report.
- The Annual OPEB Cost (AOC) under GASB 45 is \$4.9 million for the fiscal years ending June 30, 2014.
- The Net OPEB Obligation (NOO) for the fiscal year ending June 30, 2013 is \$20.1 million, and for the fiscal year ending June 30, 2014, it is estimated to be \$23.6 million depending on actual contributions during the fiscal year.
- The figures provided in this report are highly sensitive to the assumptions used, and we show how sensitive the results are to changes in the health care trend rate.

The remainder of this report provides additional detail on our analysis. First we present the results of our baseline actuarial study, following with sensitivity analyses to both assumptions and benefits; we then introduce options to reduce the Other Postemployment Benefit (OPEB) impact and conclude with information on the GASB OPEB requirements.

The fundamental principal underlying our analysis, as well as the proposed GASB standard, is that the cost of its benefits should be related to the period in which benefits are earned, rather than to the period of benefit distribution. The *normal cost* is the annual amount which would be sufficient to fund the plan benefits (net of retiree contributions) if it were paid from each employee's date of hire until termination or retirement. Under the method used in our analysis, the normal cost is determined as a percentage of pay. This means the underlying dollar amount is expected to increase each year as salary increases. The *actuarial liability* represents the portion of the value of the projected benefit at retirement that is allocated to service earned prior to the valuation date; that is, it represents the accumulation of past normal costs from date of hire until the valuation date. The *unfunded actuarial liability* represents the excess of the actuarial liability over plan assets. The *pay-as-you-go cost* represents the expected annual cost of health coverage less retiree contributions for current and future retirees based on the valuation assumptions. This figure can be significantly higher than the premiums because the premiums primarily reflect the cost of active, not retiree, coverage.



### SECTION II VALUATION RESULTS AND FUTURE PROJECTIONS

Information about the actuarial liabilities of the Plan as of June 30, 2013 is shown in Table II-1 below.

Table II-1 Actuarial Liability Pay-As-You-Go Funding (4.0% assumed discount) (\$ in thousands)								
	General Police/Fire Total							
Actives	\$	8,393	\$ 20,562	\$	28,955			
Retirees		2,607	<u>18,984</u>		21,591			
Total	\$	11,000	\$ 39,546	\$	50,546			
Assets	Assets 0 0 0							
UAL	\$	11,000	\$ 39,546	\$	50,546			

Please note, however, that GASB only requires disclosure of the above liability and does not require the entity to immediately record the entire liability on the balance sheet. GASB's requirement is that the entity is required to show the annual required contribution (ARC) as the expense, and the cumulative difference, beginning in FY10 of the Net OPEB Obligation (NOO), which is the ARC less actual contributions (plus an adjustment to avoid double-counting).

The ARC consists of two parts: (1) the *normal cost*, which represents the annual cost attributable to service earned in a given year, and (2) the 30-year amortization of the unfunded actuarial liability (UAL). The UAL under pay-as-you-go (PAYGo) funding will be larger than under actuarial funding. Not all ARC is new expense. Under the current funding method of pay-as-you-go funding, the City pays for the benefits currently provided to existing retirees. The difference between the actual contributions made (benefits provided) and the annual required contributions is the increase in expense on the financial statements of the City.

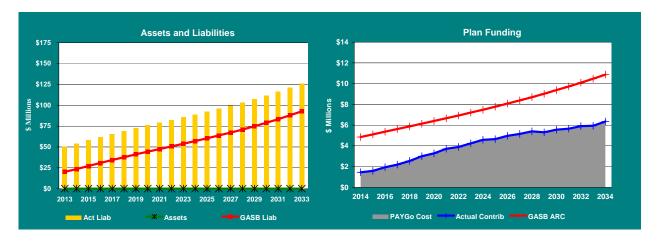
In Table II-2 below, we show the computed FY 2014 annual required contribution (ARC) under the PAYGo funding approach method and a 4.0% assumed discount rate. In addition, we have shown the PAYGo cost and the net increase.

Table II-2 GASB ARC – FY2014 Pay-As-You-Go Funding (4.0% assumed discount) (\$ in thousands)									
		General	Police/Fire		Total				
Normal Cost	\$	658	\$ 2,380	\$	3,038				
UAL Amortization		395	1,419		1,814				
Total	\$	1,053	\$ 3,799	\$	4,852				
PAYGo Cost	PAYGo Cost <u>294</u> <u>1,158</u> <u>1,452</u>								
Amt. Above PAYGo	\$	759	\$ 2,641	\$	3,400				



### SECTION II VALUATION RESULTS AND FUTURE PROJECTIONS

Looking beyond 2013, both the expense and liability on the financial statements increase dramatically under PAYGo funding. The charts below project the assets and liabilities and the funding costs for the next 20 years.



The left chart shows the actuarial liability increasing from about \$51 million to about \$126 million during the next 20 years. The red line on the same chart shows the liability appearing on the City's financial statements, which is projected to be about \$93 million after 20 years.

The chart on the right shows the annual costs. Benefit payments, net of retiree contributions, are shown by the grey area and increase from \$1.5 million to about \$6.3 million. The blue line represents the City's contributions. Under PAYGo funding, naturally they match the net benefit payments. The ARC, shown by the red line, increases from \$4.9 million to \$10.9 million over the 20-year period.

Below are the expected net benefit payments that we anticipate for the next 15 years under Pay-As-You-Go.

Table II-3									
Expected Net Benefit Payments									
		(\$ in the	ousands)						
Fiscal Year	Expected	Fiscal Year	Expected	Fiscal Year	Expected Net				
Ending	<b>Net Benefit</b>	<b>Ending</b>	Net Benefit	<b>Ending</b>	Benefit				
June 30	<b>Payments</b>	June 30	<b>Payments</b>	June 30	<b>Payments</b>				
2014	\$ 1,451.5	2019	\$ 2,995.3	2024	\$ 4,575.9				
2015	1,589.9	2020	3,278.3	2025	4,650.3				
2016	1,936.6	2021	3,722.2	2026	4,964.5				
2017	2,195.0	2022	3,896.3	2027	5,151.2				
2018	2,541.6	2023	4,241.4	2028	5,400.1				



# SECTION III RECONCILIATION WITH PRIOR RESULTS

## Value of Assets

Table III-1, below, shows the change in the value of assets through fiscal year ending 2013. City of Annapolis currently does not have a trust for their other postemployment benefits and therefore there are no assets held for these benefits.

Table III-1 Market Value of Assets							
	<b>FYE 2012</b>	FYE2013					
Market Value of Assets, beginning of year	NA	NA					
Contributions							
Employer	NA	NA					
Employee	<u>NA</u>	<u>NA</u>					
Total	NA	NA					
Benefit payments*	NA	NA					
Market Value of Assets, end of year	NA	NA					

<sup>\*</sup> Benefit payments are paid out of the general fund.



# SECTION III RECONCILIATION WITH PRIOR RESULTS

#### Reconciliation with Prior Results

Table III-2 provides an estimate of the major factors contributing to the change in liability since the last actuarial valuation report (AVR). Note that the expected values as of June 30, 2013 are based on assumptions and methods from the prior valuation.

Table III-2 Reconciliation with Prior Results (\$ thousands)								
FYE 2014 Actuarial Annual Liability Normal Cost Required June 30, 2013 FYE 2014 Contribution								
Expected values based on the 6/30/2012 actuarial valuation	\$ 48,203.5	\$ 3,098.5	\$ 4,828.4					
(Gain)/Loss due to:								
Demographic Changes	2,342.0	(60.4)	23.6					
Plan Changes	0.0	0.0	0.0					
Health Cost Assumptions	0.0	0.0	0.0					
Other Assumptions	0.0	0.0	0.0					
Total (Gain)/Loss	2,342.0	(60.4)	23.6					
June 30, 2013 valuation results	\$ 50,545.5	\$ 3,038.1	\$ 4,852.0					

Below is a brief description of each of the changes shown above:

- *Demographic Changes* refer to the difference between the 6/30/2012 and 6/30/2013 census data. There was very little change in demographics over the past year.
- *Plan Changes* refers to the change in benefits provided at retirement. There were no plan changes between 6/30/2012 and 6/30/2013.
- *Health Cost Assumptions* refers to the change in expected current and future healthcare claims, expense costs, and premiums. These assumptions were not changed for this valuation.
- Other Assumptions refers to the change in the discount rate. There were no changes in discount rate.



## SECTION IV SENSITIVITY OF TRENDS

The liabilities and ARC produced in this report are sensitive to the assumptions used. Below we have shown the liabilities under the actuarial funding scenario using a 1% increase/decrease in health care trend rates to provide some measure of sensitivity.

Table IV-1 Actuarial Liability as of June 30, 2013 (4.00% discount rate)								
Health Care Trend Rate	Health Care Trend Rate - 1% Base + 1%							
Actuarial Liability								
Actives	\$	26,807	\$	28,955	\$	30,723		
Retirees		19,791		21,591		23,691		
Total Actuarial Liability	\$	46,598	\$	50,546	\$	54,414		
Assets		0		0		0		
UAL	\$	46,598	\$	50,546	\$	54,414		

Table IV-2 GASB ARC – FYE 2014 (4.00% discount rate)							
Health Care Trend Rate - 1% Base + 1%							
Employer Normal Cost	\$	2,307	\$	3,038	\$	4,017	
UAL Amortization		1,672		1,814		1,953	
Total ARC	\$	3,979	\$	4,852	\$	5,970	
Estimated Pay as you go cost		1,452		1,452		1,452	
Amount above PayGo	\$	2,527	\$	3,400	\$	4,518	



### SECTION V ACTUARIAL FUNDING

To have a system where the assets will eventually accumulate to the actuarial liability, meaning that the entire liability is funded, the City of Annapolis may wish to begin funding this program on an actuarial basis by contributing the ARC. If the City were to establish a funding policy of contributing the ARC, the discount rate could be increased. Using a discount rate of 7.5% (matching the pension assumption) produces an unfunded liability of \$35.5 million, rather than \$50.5 million.

In addition to the change in overall liability, the annual required contribution will also decrease. Thus, in order to fund on an actuarial basis, the City needs to contribute \$3.7 million, or \$2.2 million above the PAYGo cost.

If the City increases its contribution, but it is still less than the actuarially funded scenario, the discount rate will increase above the 4.0% discount rate, and the resulting liabilities and ARC payments will likely fall between the two discount rate scenarios presented in this report.

Under actuarial funding, the assets will eventually accumulate to the actuarial liability, meaning that the entire liability is funded. Information about the actuarial liabilities, the assets, and the unfunded actuarial liability (UAL) of the Plan as of June 30, 2013 is shown in the table that follows.

Table V-1 Actuarial Liability Actuarial Funding (7.5% assumed discount) (\$ in thousands)									
	General Police/Fire Total								
Actives	\$ 6,004	\$ 13,515	\$ 19,519						
Retirees	2,102	13,900	<u>16,002</u>						
Total	\$ 8,106	\$ 27,415	\$ 35,521						
Assets	Assets 0 0 0								
UAL	\$ 8,106	\$ 27,415	\$ 35,521						



## SECTION V ACTUARIAL FUNDING

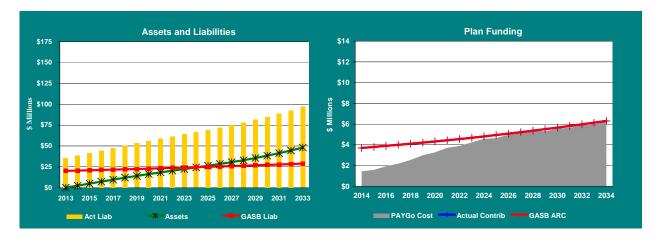
In addition to the change in overall liability, the annual required contribution will also decrease. Thus, in order to fund on an actuarial basis, the City will need to contribute an additional \$2,246 thousand above the \$1,452 thousand. In addition, the City would need to contribute approximately 10-11% of payroll in each future year to stay at the actuarial funding levels. The resulting information under actuarial funding for the ARC is shown below in Table V-2.

Table V-2 GASB ARC – FY2014 Actuarial Funding (7.5% assumed discount) (\$ in thousands)							
	Ge	eneral	Pol	ice/Fire	ı	Total	
Normal Cost	\$	446	\$	1,232	\$	1,678	
UAL Amortization		461		1,559		2,020	
Total	\$	907	\$	2,791	\$	3,698	
PAYGo Cost 294 1,158 1,452							
Amt. Above PAYGo	\$	613	\$	1,633	\$	2,246	



### SECTION V ACTUARIAL FUNDING

Over time, actuarial funding builds up assets to fund the liability, as shown in the charts below. The charts below project the assets and liabilities and the funding cost for the next 20 years under one possible actuarial funding scenario.



As the graph on the left shows, the actuarial liability increases from \$36 million to \$97 million during the next 20 years, compared to \$51 million to \$126 million if unfunded. Assets over the same period are projected to grow to \$48 million, funding 50% of the liability by 2033. Under this actuarial funding scenario, the liability on the City's financial statements growth is limited, rather than rapid growth shown on page 4.

The graph on the right shows the annual costs. Benefit payments, net of retiree contributions, are the same as the PAYGo scenario. The blue line (which is covered by the red line) represents the City's contribution and mirrors the ARC. The ARC increases from \$3.7 million to \$6.3 million over the 20-year period and is projected to have a slight decrease as a percent of payroll. Starting around 2028, the actuarial contributions are projected to be close to the pay-as-you-go costs.



## SECTION V ACTUARIAL FUNDING

Below are the employer contributions, benefit payments, assets and NOO that we anticipate for the next 15 years under Actuarial Funding.

Table V-3 Expected Contributions, Expected Net Benefit Payments, Assets and NOO (\$ in thousands)								
Fiscal Year Ending	<b>Expected</b>	Ex	pected Net	<b>Expected</b>	Expected			
June 30	Contributions	Bene	fit Payments	Assets	NOO			
2014	\$ 3,699	\$	1,452	\$ 2,331	\$ 20,448			
2015	3,803		1,590	4,800	20,818			
2016	3,904		1,937	7,199	21,195			
2017	4,002		2,195	9,613	21,579			
2018	4,107		2,542	11,958	21,970			
2019	4,216		2,995	14,120	22,368			
2020	4,328		3,278	16,267	22,773			
2021	4,443		3,722	18,234	23,186			
2022	4,561		3,896	20,291	23,606			
2023	4,685		4,241	22,273	24,033			
2024	4,813		4,576	24,189	24,469			
2025	4,946		4,650	26,309	24,912			
2026	5,082		4,965	28,404	25,363			
2027	5,222		5,151	30,609	25,823			
2028	5,367		5,400	32,869	26,291			



#### SECTION VI ACCOUNTING DISCLOSURES

**Statement No. 43 and Statement No. 45 of the Governmental Accounting Standards Board** (**GASB**) establish standards for disclosure of other postemployment benefit information by governmental employers and plans in notes to financial statements and supplementary information. In accordance with those statements, we have prepared the following disclosures:

### Schedule of Funding Progress

The schedule of funding progress compares the assets used for funding purposes to the comparable liabilities to determine how well the Plan is funded and how this status has changed over the past several years. The actuarial liability is compared to the actuarial value of assets to determine the funding ratio. The Actuarial Liability under GASB is determined assuming that the Plan is ongoing and participants continue to terminate employment, retire, etc., in accordance with the actuarial assumptions.

#### Schedule of Employer Contributions

The schedule of employer contributions shows whether the employer has made contributions that are consistent with an actuarially sound method of funding the benefits to be provided. We have also provided a *Note to Required Supplementary Information* for the financial statements.

Table VI-1 Schedule of Funding Progress									
			(\$ thousands)						
	Actuarial		Unfunded Actuarial			UAL as a Percentage			
Actuarial	Value of	Actuarial	Liabilities	Funded	Covered	of Covered			
Valuation Date	Assets (a)	Liabilities * (b)	(UAL) (b-a)	Ratio (a/b)	Payroll (c)	Payroll [(b-a)/c]			
6/30/2013	\$ 0	\$ 50,546	\$ 50,546	0%	\$ 32,445	155.8%			
6/30/2012	0	44,644	44,644	0%	31,842	140.2%			
6/30/2011	0	46,146	46,146	0%	31,350	147.2%			
6/30/2010	0	48,371	48,371	0%	30,230	160.0%			
6/30/2009	0	43,567	43,567	0%	29,208	149.2%			

Table VI-2 Schedule of Employer Contributions (\$ in thousands)							
Fiscal Year Ended June 30,	Fiscal Year Ended Annual Required Employer Percentage of ARC						
2014							
2013	4,575	1,254	27.4%				
2012	4,660	1,250	26.8%				
2011	6,189	1,621	26.2%				
2010	5,817	1,356	23.3%				

<sup>\*</sup> Under PAYGo Funding, 2011 was a roll forward from the 2010 valuation results.



## SECTION VI ACCOUNTING DISCLOSURES

Table VI-3 below shows the development of the Net OPEB Obligation.

Table VI-3	
Development of Net OPEB Obligation	
(\$ in thousands)	
Net OPEB Obligation/(Asset) as of June 30, 2012	\$16,693.7
Annual Required Contribution (ARC) for FY2013 Adjustment to ARC Interest on Net OPEB Obligation at 4.5% Annual OPEB Cost (AOC)	\$ 4,575.0 (599.1) 667.8 \$ 4,643.6
Employer Contributions:	\$ (1,253.7)
Net OPEB Obligation/(Asset) as of June 30, 2013	\$ 20,083.7

# Table VI-4 Note to Required Supplementary Information

The information presented in the required supplementary schedules was determined as part of the actuarial valuation at the date indicated. Additional information as of the latest actuarial valuation follows.

Valuation Date

Actuarial Cost Method

Amortization Method

Remaining Amortization Period

Asset Valuation Method

June 30, 2013

Entry Age Normal

Level percent open

30 years

Market Value

**Actuarial Assumptions:** 

Investment Rate of Return 4.0%

Rate of Salary Increases 3.5% (plus merit scale)

Rate of Medical Inflation 9.15% grading down to 4.25% over 14 years

Rate of Prescription Inflation 9.15% grading down to 4.25% over 14 years

Rate of Dental and Vision Inflation 4.5% per year

For determining the GASB ARC, the rate of employer contributions to the Plan is composed of the Normal Cost plus amortization of the Unfunded Actuarial Liability. The Normal Cost is a portion of the actuarial present value of plan benefits and expenses which is allocated to a valuation year by the actuarial cost method. The Actuarial Liability is that portion of the Present Value of Projected Benefits that will not be paid by Future Employer Normal Costs or active employee contributions. The difference between this liability and the funds accumulated as of the same date is the Unfunded Actuarial Liability.



# APPENDIX A PARTICIPANT DATA, ASSUMPTIONS AND METHODS

# Participant Data as of June 30, 2013

	Police/Fire	General*	Total
Actives			
Employees	234	274	508
Average Age	38	50	44
Average Service	10	13	11
Non-Medicare - Medical			
Retirees	78	21	99
Retirees Average Age	53	58	54
Spouses	40	5	45
Non-Medicare – Prescription			
Retirees	76	21	97
Retirees Average Age	53	58	54
Spouses	40	5	45
Non-Medicare – Dental			
Retirees	78	21	99
Retirees Average Age	53	58	54
Spouses	39	5	44
Non-Medicare – Vision			
Retirees	72	20	92
Retirees Average Age	52	58	54
Spouses	34	3	37

<sup>\*</sup> Contractors are not eligible for retiree medical benefits



# APPENDIX A PARTICIPANT DATA, ASSUMPTIONS AND METHODS

	Police/Fire	General	Total
Actives (under 65 only)			-
CORE Medical	28	46	74
PLUS Medical	182	191	373
Waived Medical	_24	<u>37</u>	61
Total Medical	234	274	508
Dental	210	244	454
Vision	207	245	452
Prescription	206	233	439
Retirees (under 65 only)			
Blue Choice Medical	5	2	7
CORE Medical	33	6	39
PLUS Medical	40	13	53
Waived Medical	<u>6</u>	_4	<u>10</u>
Total Medical	84	25	109
Dental	78	21	99
Vision	72	20	92
Prescription	76	21	97



# APPENDIX A PARTICIPANT DATA, ASSUMPTIONS AND METHODS

## **Economic Assumptions**

Discount Rate: 4.0% per year

Assumed Asset Return: 7.5% per year

Salary Inflation: 3.5% per year

Medical Trend: Pre-Medicare – 9.15% (initially applied for the costs for July 1, 2014 –

June 30, 2015) grading down to 4.25% over 14 years

Prescription – 9.15% (initially applied for the costs for July 1, 2014 –

June 30, 2015) grading down to 4.25% over 14 years

Dental and Vision – 4.5% for all future years

Fixed dollar amounts in the heath care benefits (deductibles, co-pays, benefit maximums, etc.) are assumed to increase periodically to keep

pace with medical trend.



# APPENDIX A PARTICIPANT DATA, ASSUMPTIONS AND METHODS

## **Demographic Assumptions**

## 1. Healthy Mortality Rates

## **General Employees:**

RP-2000 Combined Healthy Mortality Table with ages set back two years for females There is no projection for future mortality improvements.

Annual Deaths Per 10,000 Members					
Age	Age Male Female				
45	15	9			
50	21	14			
55	36	22			
60	67	39			
65	127	76			
70	222	134			
75	378	230			
80	644	376			

### **Police and Fire:**

RP-2000 Projected to 2016 with Scale AA for males and females There is no projection for future mortality improvements.

Annual Deaths Per 10,000 Members			
Age	Male	Female	
20	3	2	
25	4	2	
30	4	3	
35	8	4	
40	10	7	
45	14	10	
50	20	15	
55	33	26	
60	62	49	
65	119	95	
70	206	163	
75	353	270	
80	612	443	
85	1,069	752	
90	1,798	1,297	
95	2,648	1,926	
100	3,428	2,363	
105	3,979	2,931	



# APPENDIX A PARTICIPANT DATA, ASSUMPTIONS AND METHODS

## 2. Disabled Mortality Rates

## **General Employees:**

Male (RP-2000 Disabled Retiree Table set back 4 years) Female (RP-2000 Disabled Retiree Table)

Annual Deaths Per 10,000 Members					
Age	Age Male Female				
45	226	75			
50	238	115			
55	303	165			
60	367	218			
65	435	280			
70	522	376			
75	658	522			
80	870	723			

## **Police and Fire:**

RP-2000 Mortality Table Projected to 2016 with Scale AA, set forward 5 years

Annual Deatl	ns Per 10,000 Disa	bled Members
Age	Male	Female
30	8	4
35	10	7
40	14	10
45	20	15
50	33	26
55	62	49
60	119	95
65	206	163
70	353	270



# APPENDIX A PARTICIPANT DATA, ASSUMPTIONS AND METHODS

# 3. Disability Rates

## **General Employees:**

Annual Disabilities Per 10,000 Members			
Ordinary	Disability	Accidental	l Disability
Male	Female	Male	Female
12	9	3	2
12	9	3	2
21	15	4	3
40	27	6	4
51	41	5	4
61	58	4	4
81	81	4	4
	Ordinary Male  12 12 21 40 51	Ordinary Disability           Male         Female           12         9           12         9           21         15           40         27           51         41	Ordinary Disability         Accidental Male           12         9           12         9           12         9           21         15           40         27           51         41           5         5

## **Police and Fire:**

Annual Disabilities Per 10,000 Members		
Age	Male and Female	
20	13	
25	20	
30	28	
35	35	
40	43	
45	50	
50	50	
55	50	
60	0	

100% of disabilities are assumed to be service-connected.



# APPENDIX A PARTICIPANT DATA, ASSUMPTIONS AND METHODS

## 4. Termination Rates

# **General Employees:**

	Annual Terminations Per 1,000 Male Members			
		Years of Serv	rice	
Age	0	3	9	9+
25	200	90	50	50
30	200	90	50	40
35	200	90	50	40
40	200	90	50	30
45	200	90	50	25
50	200	90	50	25
55	200	90	50	20

An	Annual Terminations Per 1,000 Female Members Years of Service			
Age	0	3	9	9+
25	200	80	45	45
30	200	80	45	30
35	200	80	45	30
40	200	80	45	25
45	200	80	45	25
50	200	80	45	20
55	200	80	45	15



# APPENDIX A PARTICIPANT DATA, ASSUMPTIONS AND METHODS

## **Police and Fire:**

<b>Annual Terminations Per 1,000 Members</b>			
Years of Service	Terminations		
1	100		
2	50		
3	30		
4	30		
5	30		
6	30		
7	30		
8	10		
9	10		
10+	10		

## 5. Retirement Rates

## **General Employees:**

Annual Retirements Per 1,000 Members Early							
	First Year Eligible Subsequent Years						
Age	Male	Female	Male	Female			
45	0	0	0	0			
50	0	0	0	0			
55	30	35	70	100			
60	80	80	45	55			
65							
70	N/A	N/A	N/A	N/A			

Annual Retirements Per 1,000 Members Normal						
	First Yea	r Eligible	Subseque	ent Years		
Age	Male	Female	Male	Female		
45	140	160	70	100		
50	140	160	70	100		
55	140	170	70	100		
60	140	260	110	160		
65	50	60	200	230		
70	50	60	150	160		
75	1,000	1,000	1,000	1,000		



# APPENDIX A PARTICIPANT DATA, ASSUMPTIONS AND METHODS

## **Police and Fire:**

Retirement Pattern for 100 Members with 20 Years of Service				
	Number	Retiring		
Year of Service	Police	Fire		
20	35	15		
21	30	15		
22-24	15	15		
25	50	33		
26	15	15		
27	75	15		
28-29	15	25		
30	15	50		
31-34	15	30		
35	100	100		



# APPENDIX A PARTICIPANT DATA, ASSUMPTIONS AND METHODS

## **Claim and Expense Assumptions**

The following claim & expense assumptions are applicable to the 12-month period beginning July 1, 2012 and include medical and drugs. Claim costs for dependents are for spouses plus the cost for dependent children. Subsequent years' costs are based on the assumptions below adjusted with trend.

		Males			Female Spous	es
Age	EPO	Core	Plus	EPO	Core	Plus
45	\$ 4,054	\$ 3,727	\$ 4,932	\$ 7,238	\$ 6,626	\$ 8,472
50	5,288	4,860	6,432	8,472	7,760	9,972
55	6,904	6,347	8,398	10,088	9,246	11,939
64	11,307	10,394	13,754	14,491	13,293	17,294
		<b>Females</b>			Male Spouse	S
Age	ЕРО	Females Core	Plus	EPO	Male Spouse Core	s Plus
<b>Age</b> 45	<b>EPO</b> \$ 6,336		<b>Plus</b> \$ 7,707	<b>EPO</b> \$ 9,520	-	
		Core			Core	Plus
45	\$ 6,336	<b>Core</b> \$ 5,824	\$ 7,707	\$ 9,520	<b>Core</b> \$ 8,724	<b>Plus</b> \$ 11,247

City of Annapolis – Annual Drug Claims						
	Ret	irees	Spo	ouses		
Age	Male	Female	Male	Female		
45	\$ 1,138	\$ 1,522	\$ 2,096	\$ 2,480		
50	1,572	2,008	2,529	2,966		
55	2,099	2,584	3,057	3,542		
64	3,140	3,429	4,098	4,386		

City of Annapolis – Additional Annual Claims						
Plan	an Individual Husband/Wi					
Dental Core	\$	205.92	\$ 383.40			
Dental Plus		344.64	748.08			
Vision Core		77.04	165.84			
Vision Plus		102.12	219.60			

The above claim cost assumptions were increased by 9.50% for pre-Medicare medical and drug and by 4.5% for dental and vision to apply for the period July 1, 2013 through June 30, 2014.



# APPENDIX A PARTICIPANT DATA, ASSUMPTIONS AND METHODS

Retiree and Spouse Contributions:

The future (retire after 7/1/2012) General retiree and spouse will pay the remainder of the retiree premiums for the Core plan after the City pays 2.5% multiplied by each year of service up to a max of 75%. All SRA employees not in ASFCME will have to buy up for other options.

The future (retire after 7/1/2008 and vested as of 7/1/2012) Police and Fire retiree and spouse will pay 30% of the retiree premiums for the Core plan. For those participants not vested as of 7/1/2012, they will pay the remainder of the retiree premiums for the Core plan after the City pays 2.5% multiplied by each year of service up to a max of 70%. All Police and Fire will have to buy up for other options.

City of Annapolis – Monthly Retiree Premiums for Contributions (100% cost)						
	EPO	Core	Plus	RX		
Individual	\$ 518.01	\$ 466.78	\$ 568.97	\$ 133.99		
Parent/Child	1,030.87	933.32	1,138.38	266.81		
Husband/Wife	1,325.99	1,196.27	1,567.22	440.22		
Family	1,495.71	1,330.86	1,745.89	448.25		
	<b>Dental Core</b>	<b>Dental Plus</b>	Vision Core	Vision Plus		
Individual	\$ 17.16	\$ 28.72	\$ 6.42	\$ 8.51		
Parent/Child	31.95	44.98	13.82	18.30		
Husband/Wife	31.95	62.34	13.82	18.30		
Family	47.32	83.49	13.82	18.30		

The premiums are assumed to increase with medical trends. For the current retirees, actual retiree contributions were provided and are assumed to increase with trend. For this valuation, the above retiree contribution rates, as well as the actual contributions for current retirees, were increased by 9.50% for pre-Medicare medical and drug and by 4.5% for dental and vision.

Percentage of Employees Electing Coverage at Retirement:

It is assumed that 100% will elect coverage and will select the same coverage at retirement. Thus if a retiree has Plus benefits, they will pay the difference between Plus and Core.

## Family Composition:

We have assumed that those electing coverage also cover their spouses. We have assumed that 51% of the population is married with General males four years older than their wives, and Police/Fire males one year older than their wives.



# APPENDIX A PARTICIPANT DATA, ASSUMPTIONS AND METHODS

## Methodology

The Entry Age Actuarial Cost Method was used to value the Plan's actuarial liabilities and to set the normal cost. Under this method, the normal cost rate is the percentage of pay contribution which would be sufficient to fund the plan benefits if it were paid from each member's entry into the System until termination or retirement. A sample new entrant population based on ages of recently hired participants was used to value the normal cost.

For this year's valuation we completed a partial roll-forward, meaning that claims and trends have been kept the same as the prior year valuation, but the census data has been updated. The claim and expense assumptions for non-Medicare retirees were based on the premium rates for the collection of plans offered for the plan year ending June 30, 2013. We assumed that claims and contributions increased with the appropriate trends for the fiscal year ending June 30, 2014.

This valuation does not recognize any changes that have been negotiated or adopted after June 30, 2013.



### APPENDIX B SUBSTANTIVE PLAN PROVISIONS

## **Summary of Key Substantive Plan Provisions**

*Eligibility:* 

**For Police/Fire**: The City will provide to employees and eligible dependents, at cost of co-pay and deductibles, medical, hospitalization, major medical, dental, vision care, and co-pay prescription insurance coverage in effect at the time of retirement for employees who retire with 20 years of service under Retirement Plan for Members of the Police and Fire Departments of the City of Annapolis. Employees who retired after 7/1/2002, but before 7/1/2008 will pay 20% of the premiums. Employees retiring after 7/1/2008 and those vested has of 7/1/2012 will pay 30% of the premiums. Employees not vested as of 7/1/2012, will pay the remainder of the retiree premiums for the Core plan after the City pays 2.5% multiplied by each year of service up to a max of 70%. Coverage continues until retiree and/or spouse reaches Medicare eligibility age. Additional Medicare coverage is provided at full cost to retiree and/or spouse.

**For General**: The City will provide to employees and eligible dependents, at cost of co-pay and deductibles, medical, hospitalization, major medical, dental, vision care, and co-pay prescription insurance coverage in effect at the time of retirement for employees who retire with 20 years of service under State Retirement and Pension Systems of Maryland – Employees' Pension System. Employees who retired after 7/1/2012, will pay the remainder of the retiree premiums for the Core plan after the City pays 2.5% multiplied by each year of service up to a max of 75%. Coverage continues until retiree and/or spouse reaches Medicare eligibility age. Additional Medicare coverage is provided at full cost to retiree and/or spouse.

#### Employee Contributions:

No employee contributions are required prior to retirement to fund the City of Annapolis Other Postemployment Benefits Plan.



### APPENDIX B SUBSTANTIVE PLAN PROVISIONS

### **Benefits for Retirees**

#### MEDICAL & PRESCRIPTION PLAN CHOICES

The City of Annapolis offers several medical plan options through CareFirst BlueCross BlueShield. Retirees may select from one of the following medical plans: CareFirst BlueChoice EPO, Core Plan, and the Plus Plan. Prescription drug benefits are provided through ExpressScripts and are the same regardless of the medical plan. The plans are summarized on the following page. Participants may choose one of the following coverage levels: Individual, Parent and Child, Husband and Wife or Family and may choose medical and drug coverage separately.

#### **DENTAL PLAN CHOICES**

The Core dental plan is a DHMO offered through DentaQuest Advantage. Members must use network providers and there are no deductibles to satisfy. The Plus dental plan is a Regional PPO plan through CareFirst BCBS. Benefits are summarized below.

CORE DENTAL PLAN SUMMARY		PLUS DENTAL PLAN SUMMARY			
DentaQuest Advantage - DHMO	In Network Only *	CareFirst Regional - PPO	In Network	Out of Network *	
Maximum Benefit	\$2,000	Maximum Benefit	\$1,500	\$1,500	
Deductible - Individual	\$25	Deductible - Individual	\$25	\$50	
Deductible - Family	\$75	Deductible - Family	\$75	\$150	
Level I - Preventive	\$0-115 Copay	Class I - Preventive (Deductible Waived)	100%	75% of AB	
Level II - Primary Restorative	\$13-780 Copay	Class II - Basic Services	80%	60% of AB	
Level III - Major Restorative	\$40-2300 Copay	Class III - Major Surgical Services	80%	60% of AB	
Level IV - Child Orthodontia	Not Covered	Class IV - Major Restorative Services	50%	35% of AB	
Level IV - Adult Orthodontia	Not Covered	Class V - Orthodontia ( <i>Deductible Waived</i> ) -\$800 Maximum Lifetime Benefit	50%	35% of AB	

<sup>\*</sup> This plan requires members to use network providers. Benefits under this plan are paid according to a fee schedule. Participating providers and a fee schedule is available online by visiting www.dentaquestdental.com.

#### **VISION PLAN CHOICES**

Both SpectraFlex Vision Options, Core and Plus, offer the Vision Service Plan (VSP). Each plan includes coverage for a comprehensive eye examination and select lenses and frames. The Core Plan provides services every 24 months and the Plus Plan allows services to be rendered every 12 months. The VSP plan allows members to access care either through the VSP provider network or through any provider. When accessing care in network, examinations are covered in full after a \$10 copayment. Members choosing care from non-VSP providers are required to pay in full when receiving services and submit a claim form for reimbursement.



<sup>\*</sup> Reimbursement is based on CareFirst's Allowed Benefit (AB). Participating providers may be found by visiting www.carefirst.com and selecting the Regional Preferred PPO dental plan.

## APPENDIX B SUBSTANTIVE PLAN PROVISIONS

CAREFIRST BLUECROSS BLUESHIELD	EPO Medical Plan	Core M	edical Plan	Plus Med	dical Plan
BECESHELD	In Network Only *	In Network	Out of Network **	In Network	Out of Network **
Maximum Benefit (Lifetime)	Unlimited	Unlimited		Unlimited	
Deductible - Individual, Family	N/A	N/A	\$300 / \$900	N/A	\$100 / \$200
Out-of-Pocket Maximum - Individual, Family	N/A	\$1,000	0 / \$2,000	\$800 /	\$1,600
INPATIENT SERVICES Hospitalization Medical/Surgical	\$100 Copay; 100% 100%	\$100 Copay; 90% 90%	\$100 Copay; 70% 70%	\$100 Copay; 100% 100%	\$100 Copay; 80% 80%
Maternity Care	100%	90%	70%	100%	80%
OUTPATIENT SERVICES					
Physician Visits	\$15 Copay	\$15 Copay	70%	\$15 Copay	80%
Specialists	\$25 Copay	\$15 Copay	70%	\$15 Copay	80%
Routine Physicals (PCP/Specialist)	\$15/25 Copay	\$15 Copay	70%	\$15 Copay	80%
Diagnostic/Xray/Lab - Provider's Office	e 100%	\$15 Copay	70%	\$10 Copay	80%
Outpatient Surgery	\$20 Copay	90%	70%	100%	80%
Well Child Care	\$15 Copay	\$15 Copay	70%	\$10 Copay	80%
Durable Equipment Medical	75%	90%	70%	100%	80%
Emergency Room (illness)	\$75 Copay	\$50 Copay; 90%	\$50 Copay; 90%	\$50 Copay; 100%	\$50 Copay; 100%
Emergency Room (injury)	\$75 Copay	\$25 Copay; 90%	\$25 Copay; 90%	\$25 Copay; 100%	\$25 Copay; 100%
Urgent Care Facility	\$30 Copay	\$25 Copay	70%	\$25 Copay	80%
MENTAL ILLNESS - SUBSTANCE	ABUSE				
Inpatient Psychiatric	100%	90%	70%	100%	80%
Outpatient Psychiatric Visits 1-5	80%	80%	80%	80%	80%
Outpatient Psychiatric Visits 6-30	65%	65%	65%	65%	65%
Outpatient Psychiatric Visits 31+	50%	50%	50%	50%	50%
Alcohol/Substance Abuse	Same as Psychiatric Benefits	Same as Ps	ychiatric Benefits	Same as Psyc	hiatric Benefits
PRESCRIPTION DRUG PLANS					
Prescription Drug Program	ExpressScripts	Expre	essScripts	Expres	sScripts
Annual Maximum Benefit	N/A	]	N/A	N	I/A
Generic - Preferred - Non-Preferred	30-Day Supply: \$10 - \$25 - \$40	30-Day Suppl	y: \$10 - \$25 - \$40		dy: \$10 - \$25 - 40
90-Day Supply / Mail-Order	\$20 - \$50 - \$80	\$20 -	\$50 - \$80	\$20 - \$	50 - \$80
Non-Covered Drugs	100% ES Discounted Cost	100% ES D	iscounted Cost	100% ES Di	scounted Cost

<sup>\*</sup> Members must select a Primary Care Physician to oversee all medical care. Referrals to specialists are required.



<sup>\*\*</sup> Out of network benefits are reimbursed based on an Allowed Benefit (AB) set by CareFirst BCBS; therefore, members will be responsible for any difference between the provider's charge and the CareFirst Allowed Benefit. Members accessing care from CareFirst providers will not be balance billed in excess of the Allowed Benefit.

### APPENDIX C GLOSSARY OF TERMS

## 1. Actuarial Assumptions

Assumptions as to the occurrence of future events affecting pension costs such as: mortality, withdrawal, and retirement; changes in compensation; rates of investment earnings, and asset appreciation or depreciation; procedures used to determine the actuarial value of assets; and other relevant items.

#### 2. Actuarial Cost Method

A procedure for determining the actuarial present value of pension plan benefits and expenses and for developing an allocation of such value to each year of service, usually in the form of a normal cost and an actuarial liability.

### 3. Actuarial Gain (Loss)

A measure of the difference between actual experience and that expected based upon a set of actuarial assumptions during the period between two actuarial valuation dates, as determined in accordance with a particular actuarial cost method.

### 4. Actuarial Liability

The portion of the actuarial present value of projected benefits which will not be paid by future normal costs. It represents the value of the past normal costs with interest to the valuation date.

#### **5.** Actuarial Present Value (Present Value)

The value as of a given date of a future amount or series of payments. The actuarial present value discounts the payments to the given date at the assumed investment return and includes the probability of the payment being made. As a simple example: assume you owe \$100 to a friend one year from now. Also, assume there is a 1% probability of your friend dying over the next year, in which case you won't be obligated to pay him. If the assumed investment return is 10%, the actuarial present value is:

		Probability		1	<u>.</u>	
Amount		of Payment		(1+Discount Rate)		
\$100	X	(101)	X	1/(1+.1)	=	\$90

#### 6. Actuarial Valuation

The determination, as of a specified date, of the normal cost, actuarial liability, actuarial value of assets, and related actuarial present values for a pension plan.

#### 7. Actuarial Value of Assets

The value of cash, investments and other property belonging to a pension plan as used by the actuary for the purpose of an actuarial valuation. The purpose of an actuarial value of assets is to smooth out fluctuations in market values. This way, long-term costs are not distorted by short-term fluctuations in the market.



## APPENDIX C GLOSSARY OF TERMS

## 8. Amortization Payment

The portion of the pension plan contribution which is designed to pay interest and principal on the unfunded actuarial liability in order to pay for that liability in a given number of years.

## 9. Entry Age Normal Actuarial Cost Method

A method under which the actuarial present value of the projected benefits of each individual included in an actuarial valuation is allocated on a level basis over the earnings of the individual between entry age and assumed exit ages.

#### 10. Normal Cost

That portion of the actuarial present value of plan benefits and expenses which is allocated to a valuation year by the actuarial cost method.

## 11. Unfunded Actuarial Liability

The excess of the actuarial liability over the actuarial value of assets.

## 12. Funded Percentage

The ratio of the actuarial value of assets to the actuarial liabilities.

### 13. Mortality Table

A set of percentages which estimates the probability of death at a particular point in time. Typically, the rates are annual and based on age and sex.

## 14. Discount Rate

The assumed interest rate used for converting projecting dollar related values to a present value as of the valuation date.

### 15. Medical Trend

The assumed increase in dollar related values in the future due to the increase in the cost of health care.

